## P02000125392

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SECRETARY OF STATE OF DIVISION OF CORPORATION

RA Chg.

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rochange its registered office or registered agent, or both, in the State of Florida.	_
	the corporation: ANCECO CORPORATION	
	office address: P.O. Box 472, Holmdel, N.J. 07733	
3. The mailing add	address (if different):	
4. Date of incorpo	poration/qualification: 11/21/2002 Document number: P02000125392	
5. The name and s Florida Departm	d street address of the current registered agent and registered office on file with the treet address.	
_	MADIAN GONZALEZ	
_	1738 - 17th Avenue North	
	Lake Worth, FL 33460	JABK DIVISIO
6. The name and s (if changed):	I street address of the new registered agent (if changed) and /or registered office	2006 HAY 16 AH 7: 56
_	Meyling Hines	玉
	2917 Buckley Avenue	1: 56
_	Lake Worth, FL 33461	
The street address as changed will be	ess of its registered office and the street address of the business office of its registered ag be identical.	gent,
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so be board or the corporation has been notified in writing of the change.	
		4
<b>(- 0</b>	Alexander Blake, Vice-Preside (Printed or typed name and title)	
I hereby accept the I further agree to performance of magent. Or, if this hereby confirm the	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	,
Ce / Com	induce of Registered Agent)  Mey 4 2006 (Date)	_
If signing on beha		
(Тур	yped or Printed Name)	

\* \* \* FILING FEE: \$35.00 \* \* \*